

**LACASSE & ASSOCIATES***PROFESSIONAL PATENT SERVICES*

1725 Duke Street, Suite 650

Alexandria, Virginia 22314

Phone (703) 838-7683/Facsimile (703) 838-7684

E-Mail: [patserv@lacasse-patents.com](mailto:patserv@lacasse-patents.com)**RECEIVED  
CENTRAL FAX CENTER****AUG 24 2005****CONFIDENTIAL  
FACSIMILE TRANSMITTAL SHEET****DATE SENT:** August 24, 2005**DELIVER TO:**

**Name:** Examiner Benjamin R. Bruckart  
**Company:** USPTO / GAU 2155  
**Fax No:** 571-273-8300

**FROM:** Brian S. Myers**YOUR FILE:** 09/825,178

THERE WILL BE A TOTAL OF **3** PAGE(S) INCLUDING THIS COVER SHEET.  
OUR FACSIMILE MACHINE COMMUNICATES WITH ALL GROUP III, II AND FM6  
MACHINES.

**NOTICE:** The documents transmitted by this facsimile are intended for the use of the individual or the entity to which it is addressed and may contain information that is privileged, confidential, and exempt from disclosure under applicable law. If the reader of the message is not the intended recipient, or the employee, or agent responsible for delivering this document to the intended recipient, you are hereby notified that any dissemination, distribution, or copying of this communication is strictly prohibited. If you have received this communication in error, please notify us immediately by telephone and return the original facsimile to us at the above address via the Postal Service.

- Transmittal Form
- Authorization to Act

PTO/SB/21 (09-04)

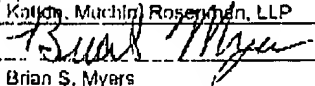
Approved for use through 07/31/2006, OMB 0651-0031

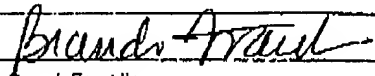
U.S. Patent and Trademark Office, U.S. DEPARTMENT OF COMMERCE

Under the Paper Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)	Application Number	09/825,178
	Filing Date	Apr 3, 2001
	First Named Inventor	Oguchi
	Art Unit	2155
	Examiner Name	Benjamin R. Bruckart
Total Number of Pages in This Submission	Attorney Docket Number	FUJY 18.546

ENCLOSURES (Check all that apply)		
<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/Declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement  <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance communication to (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):  Authorization to Act
Remarks		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Kallan, Muchin, Rosenfeld, LLP	
Signature		
Printed name	Brian S. Myers	
Date	August 22, 2005	Reg. No. 46947

CERTIFICATE OF TRANSMISSION/MAILING		
I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.		
Signature		
Typed or printed name	Brandi Franklin	Date August 22, 2005

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

**AUTHORIZATION TO ACT IN A REPRESENTATIVE CAPACITY****In re Application of:**

Naoki Oguchi

**Application No.**

09/825,178

**Filed:**

4/3/2001

**Title:**

Communication Data Relay System

**Attorney Docket No.**

FUYJ 18.546

**Art Unit:**

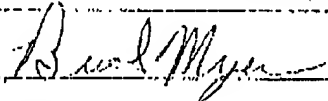
2155

The practitioner named below is authorized to conduct interviews and has the authority to bind the principal concerned. Furthermore, the practitioner is authorized to file correspondence in the above-identified application pursuant to 37 CFR 1.34:

Name	Registration Number
Ramraj Soundararajan	53832

This is not a Power of Attorney to the above-named practitioner. Accordingly, the practitioner named above does not have authority to sign a request to change the correspondence address, a request for an express abandonment, a disclaimer, a power of attorney, or other document requiring the signature of the applicant, assignee of the entire interest or an attorney of record. If appropriate, a separate Power of Attorney to the above-named practitioner should be executed and filed in the United States Patent and Trademark Office.

**SIGNATURE of Practitioner of Record**

<b>Signature</b>		<b>Date</b> August 22, 2005
<b>Name</b>	Brian S. Myers	<b>Registration No., if applicable</b> 46947
<b>Telephone</b>	212-940-8800	